## **TOWN OF DAYTON**

33 Clarks Mills Road, Dayton, ME 04005 Phone 207-499-7526 Fax 207-499-2946 www.dayton-me.gov

| Employment Application Form  | n                  | W                       | WE ARE AN EQUAL OPPORTUNITY EMPLOYER  |                           |  |
|--|--------------------|-------------------------|---------------------------------------|---------------------------|--|
| Last Name  | First Name         |                         | Middle N                              | Middle Name               |  |
| Address  |                    |                         |                                       |                           |  |
| City   | State              | Zip Code                | Telephone No.                         |                           |  |
|  |                    |                         |                                       |                           |  |
| Are you a citizen of the United States of<br>Proof of citizenship or immigration states  |                    |                         | United States                         | ?                         |  |
| Position applied for:  |                    |                         | Date of a                             | Date of application:      |  |
| Referred by:   | Date available     |                         | Salary desired:                       |                           |  |
| Have you previously applied for a posi What position?  | ition with the To  | wn of Dayton: Yes       | No                                    |                           |  |
| Educational Record   |                    |                         |                                       |                           |  |
|  | D.4-:              | Danna of Com            | 4:C:4-                                | Cuadwata Vaa/Na           |  |
| Give names & addresses of schools  | Major              | Degree of Cer           | tificate                              | Graduate Yes/No           |  |
| High School  |                    |                         |                                       |                           |  |
| College  |                    |                         |                                       |                           |  |
|  |                    |                         |                                       |                           |  |
| Graduate of Other Schools  |                    |                         |                                       |                           |  |
|  |                    |                         |                                       |                           |  |
| Continuing Education   |                    |                         |                                       |                           |  |
|  |                    |                         |                                       |                           |  |
|  |                    |                         |                                       |                           |  |
|  |                    |                         |                                       |                           |  |
| Employment Record  |                    | •                       |                                       |                           |  |
| Give names & addresses of employers include any military service assignmen which would reveal race, color, religion Employer's Name: | ts. Also include j | iob related volunteer a | ctivities. (You                       | may exclude organizations |  |
| Address:   |                    |                         |                                       |                           |  |
| Dates of Employment: Start Date (MM  | 1/YY)              | End Date (MM/YY         | )                                     |                           |  |
| Salary: Starting \$ Final \$   |                    | Date of last sala       | Date of last salary increase: (MM/YY) |                           |  |
| Supervisor's Name:   |                    | Supervisor's ph         | Supervisor's phone number:            |                           |  |
| Title & specific duties/responsibilities (   | (Indicate "See Re  | esume" if applicable):  |                                       |                           |  |
| Reason for leaving:  |                    |                         |                                       |                           |  |
| Employer's Name:   |                    |                         |                                       |                           |  |

| Address:   |                       |   |  |  |  |
|--|-----------------------|---|--|--|--|
| Dates of Employment: Start Date  | e (MM/YY)             | End Date (MM/YY)  |  |  |  |
| Salary: Starting \$  | Final \$              | Date of last salary increase: (MM/YY)                           |  |  |  |
| Supervisor's Name:   |                       | Supervisor's phone number:                                      |  |  |  |
| Title & specific duties/responsibil  | lities (Indicate "See | Resume" if applicable):   |  |  |  |
|  |                       |   |  |  |  |
| Reason for leaving:  |                       |   |  |  |  |
|  |                       |   |  |  |  |
| Employer's Name:   |                       |   |  |  |  |
| Address:   |                       |   |  |  |  |
| Dates of Employment: Start Date  | e (MM/YY)             | End Date (MM/YY)  |  |  |  |
| Salary: Starting \$  | Final \$              | Date of last salary increase: (MM/YY)                           |  |  |  |
| Supervisor's Name:   |                       | Supervisor's phone number:                                      |  |  |  |
| Title & specific duties/responsibil  | lities (Indicate "See | Resume: if applicable):   |  |  |  |
|  |                       |   |  |  |  |
| Reason for leaving:  |                       |   |  |  |  |
|  |                       |   |  |  |  |
| <b>Professional Associations</b>   |                       |   |  |  |  |
|  | -                     | (You may exclude organizations which would reveal race, color,  |  |  |  |
| religion, gender, national origin,   | age, ancestry, disal  | bility, or other protected stats.)                              |  |  |  |
|  |                       |   |  |  |  |
|  |                       |   |  |  |  |
|  |                       |   |  |  |  |
| Computer Experience  |                       |   |  |  |  |
| What software can you use?   |                       |   |  |  |  |
| Word Processing:   |                       |   |  |  |  |
| Spreadsheet:   |                       |   |  |  |  |
| Database:  |                       |   |  |  |  |
| Municipal Software:  |                       |   |  |  |  |
| Other:   |                       |   |  |  |  |
|  |                       |   |  |  |  |
| Personal Information   |                       |   |  |  |  |
| Have you ever been convicted of a crime, other than a minor traffic violation? If yes, please explain. Yes No An affirmative response will not automatically disqualify you from being considered as a candidate for employment. |                       |   |  |  |  |
| An aggirmative response will not automatically disqualify you from being considered as a candidate for employment.   |                       |   |  |  |  |
|  |                       |   |  |  |  |
| Additional Information B   | lease use this space  | e to provide any additional information which you believe could |  |  |  |
| <b>Additional Information</b> Please use this space to provide any additional information which you believe could qualify you for employment with the Town of Dayton.  |                       |   |  |  |  |
|  |                       |   |  |  |  |
|  |                       |   |  |  |  |

I hereby affirm that the information provided on this application (and accompanying resume) is true and complete to the best of my knowledge. I also agree that any false or misleading information given in my application or interview, or any omission of requested information, may disqualify me for further consideration for employment and may be considered justification for dismissal if discovered at a later date.

I understand the filing of an application does not guarantee employment. I will be expected to meet the established employment standards which will include satisfactory references, the ability to perform the position requirement, and the satisfactory performance thereof.

I understand and acknowledge that my employment relationship with this organization is an "at will" nature which means that the Employee may resign at any time and the Employer may discharge the Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by the Board of Selectmen of the Town of Dayton.

I authorize the Town of Dayton to conduct a thorough investigation of my past/current employment and/or education listed above. This includes the results of a criminal background check. I release from all liability or responsibility the Town of Dayton or its agents for requesting and all persons, companies, and corporation for supplying such information.

I hereby acknowledge that I have read, understand and accept the above conditions.

|  | Signature | Date |
|--|-----------|------|
|--|-----------|------|

The Town of Dayton considers applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital status, veteran status, sexual orientation, or any other legally protected status.